

ORIGINAL

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly)	B. Date of Delivery
<p>1. Article Addressed to: 030717</p> <p>Resource Express Inc. 331-3 Parkridge Avenue Orange Park FL 32065-86</p>	<p>C. Signature</p> <p>X <i>John Ostrander</i></p> <p><input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
<p>2. Article Number (Transfer from service label)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>Express Mail Return Receipt for Merchandise C.O.D. Extra Fee) <input type="checkbox"/> Yes</p>	
<p>PS Form 3811, March 2001</p>	<p>7002 0860 0001 1755 6859</p> <p>Domestic Return Receipt</p>	



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